

Parish (C.W.)

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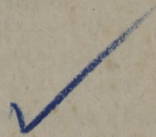
ADDRESS,

DELIVERED AT THE ANNUAL MEETING

OF THE

Chester County Medical Society,

MAY 1st, 1849,



BY DR. CHARLES W. PARISH.

PUBLISHED BY ORDER OF THE SOCIETY.



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1849.

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WEST CHESTER, May 5th, 1849.

To Dr. C. W. PARISH,

Dear Sir : At the last annual meeting of the "Chester County Medical Society," the undersigned were appointed a Committee to solicit for publication a copy of your excellent address, delivered on that occasion. With many wishes for your returning health,

We remain, with sentiments of respect,

Your's truly,

W. D. HARTMAN,
WILMER WORTHINGTON, } Committee.
SUMNER STEBBINS.

MARSHALTON, 7th May, 1849.

DEAR SIRS :

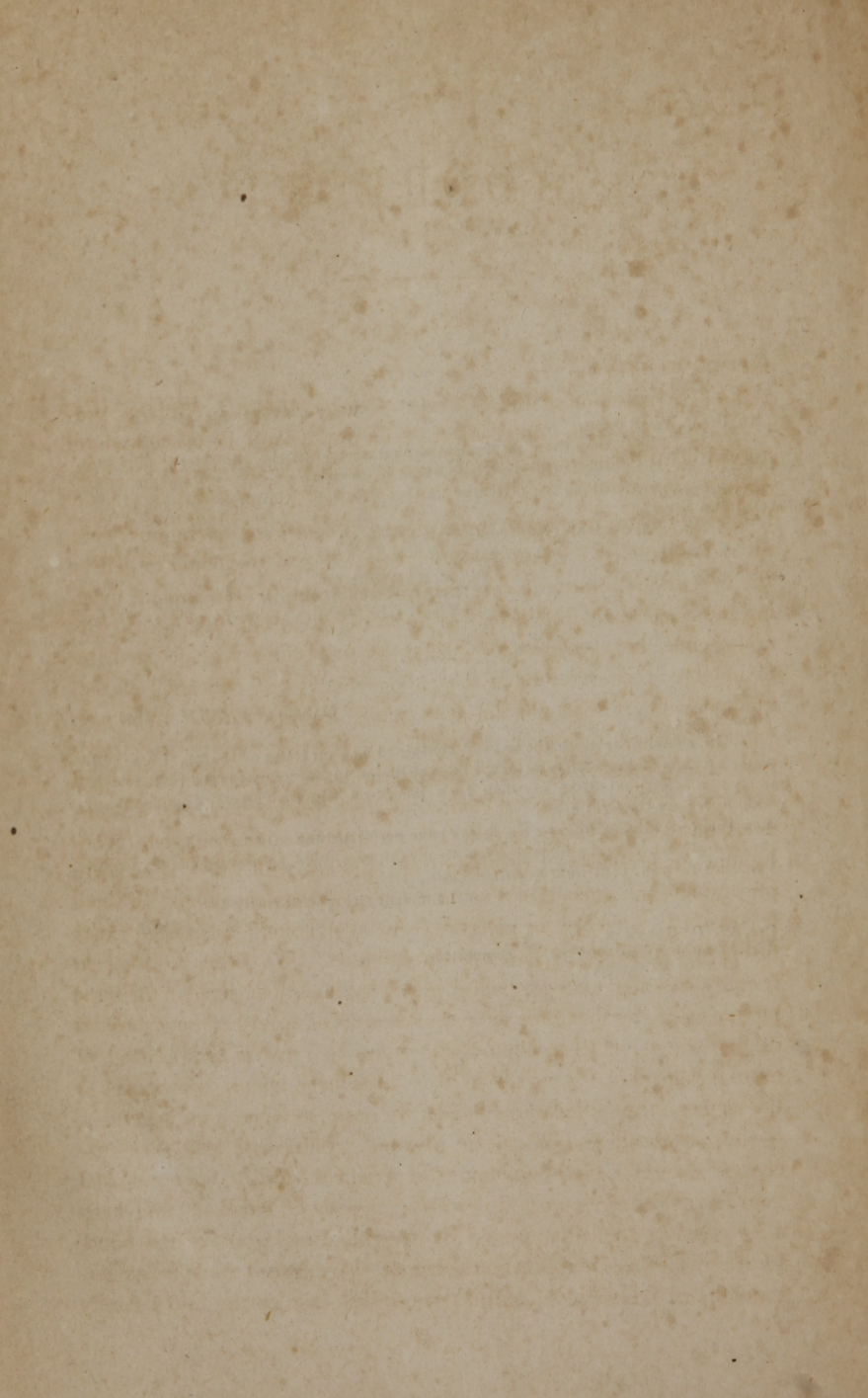
In compliance with the request contained in your letter of the 5th, I herewith transmit a copy of the address which I had the honor to deliver on the 1st inst., which, had no higher estimate than my own been placed on it by the Society, most assuredly would never see the light again:

For the very kind manner in which you have performed the duty assigned you, and for your cordial wishes for my returning health, accept, gentlemen, my thanks and my warmest wishes for your continual health and prosperity.

I am, dear sirs, your's sincerely,

C. W. PARISH.

Drs. W. D. HARTMAN,
WILMER WORTHINGTON, } Committee.
SUMNER STEBBINS,



ADDRESS.

GENTLEMEN :—

THE Constitution of the "*Chester County Medical Society*" provides, that "At each annual meeting an orator shall be elected whose duty it shall be to prepare, and deliver a public address at the next annual meeting."

This Society has been in existence (though its operations were awhile suspended,) about twenty years. I had the honor to deliver the first annual oration before the Society. At the last annual meeting the Society again deputed me as its organ, to address, not the *Society* alone, but the *public*. I hope the title orator will not lead any to indulge in expectations of a highly wrought and delicately elaborated address : I shall attempt nothing of the sort ; for if I were vain enough to attempt to soar, you would soon discover by the awkwardness of my manœuvres, and the suddenness of my descent that *I* am not *wise*. By ordering the annual address to be public, you will understand that our object is not only to improve ourselves, but to enlighten our friends and neighbors on subjects with which it is fairly presumable the profession is better acquainted than the public. I have been asked, what are the objects of our association ? what need exists for such a Society ? The answer is short. We bring together in friendly meeting, once in awhile, men who, though engaged in the same pursuits, are by the force of circumstances, deprived of opportunities of frequent social intercourse ; we desire to form a brotherhood of mutual helpers in the pursuit of that knowledge which is essential to the successful practice of medicine ; we desire to smooth off asperities, —shorten distances—dispel or prevent professional jealousies—exchange scientific views—compare experiences—fortify ourselves and guard our friends against the growing inroads of quackery and keep alive pleasant acquaintanceship by a semi-annual grasp of the hand. I have made this explanation because there exists some misunderstanding on the subject ; and I was called last spring into a family

usually attended by another practitioner, because they understood that the Society was formed for the purpose of doubling medical fees, and that I was not a member of the extortionate confederacy.

The contract between a physician and his patient has been said to be a contract of life and death—awful words!—often, perhaps generally, strictly true. Now a contract implies not only parties competent to make it, but also reciprocal duties to be performed. A contract is not a one-sided affair—if either party fails in the expressed or implied terms of the contract the other party is clear. What then is required of the physician on the one part, and the patient and his accessaries on the other part?

In addition to the necessary stock of medical knowledge, in all its numerous departments, with ability to retain and improve it, a physician should possess, in order to a safe and successful medical career, a cool head, a clear, acute, ready judgment, decision joined with mildness, a tender feeling for the suffering, an ardent desire, unconnected with mercenary views, to relieve the afflicted, and unyielding assiduity in the discharge of the duties and obligations of his profession; as a surgeon, it is said, he should possess a lion's heart, an eagle's eye, and a lady's hand. A physician should be able so to separate truth from error as to enable him fearlessly to examine the pretensions of any thing that may be offered as a system of medicine or a method of treating disease; and to detect and expose whatever contravenes the laws of the animal economy either in health or in disease. The enlightened student of medicine (and I contend that a practitioner of medicine should be a student all his days,) will consider nothing too high or too low for investigation. On him, as much as on any man, is the Apostolic injunction binding, "Prove all things; hold fast that which is good." An examination does not imply an adoption: some things are to be examined in order that we may be the better prepared to avoid their errors. He who has toiled over ruin and desolation to the summit of *Ætna*, and looked into the very mouth of its crater does not therefore feel bound to throw himself into the frightful chasm, the more hideous for having been seen. A physician (Allopathist is the modern fashionable term with some) thus enlightened, as experience goes hand in hand with study and observation, is prepared to use with power and safety every means of preserving or restoring health within his reach, moral, mental and physical, whether it be mercury or skipping rope, arsenic or bread pills. I say a physician—

I do not like the word *allopathist* : it is a sort of pleonasm. It is enough to have it understood that he who would be called a physician is one who, rejecting all dogmas, is prepared to select and *use all* things that are subservient to health, and to detect and *avoid all* things that are injurious. The regular practice of medicine has hitherto maintained its "pride of place" from which all the "mousing hawks" of quackery have failed to dislodge it; all unscientific one-handed systems of practice have their day and are then consigned to oblivion. Therefore let there be no stooping—no indirect admissions that something more definite is necessary to mark the line between scientific medicine and quackery. Let it still be *PHYSICIAN* and *QUACK*.

A physician alive to all the delicate proprieties of life in general, and of professional life in particular, may be easily distinguished from the forward, assuming and self-inflated pretender. He will so deport himself as to show that he is more studious of attracting and serving others than of obtruding himself. To the honor of the profession it may with truth be said that few, if any, live so much for others and so little for themselves. Often the greater part of successive days and nights of anxiety and toil are bestowed where pecuniary remuneration is impossible, and where to professional services, private charity must be added in order to give efficiency to the resources of medical aid. The empiric on the other hand is always obtruding his vaunted remedies on the public notice, and by this disgusting method often succeeds in realizing a fortune. To this you are aware a physician cannot stoop.

The empirics "comparing themselves with themselves, and measuring themselves by themselves," and by no other standard, "are not wise." Some of their sapient expositions remind one of Nick Bottom's account of his reverie: "I have had a dream past the wit of man to say what dream it was : man is but an ass if he go about to expound this dream. Methought I was—no man can tell what. Methought I was, and methought I had—but man is but a patched fool, if he will offer to say what methought I had. The eye of man hath not heard—the ear of man hath not seen ; man's hand is not able to taste, his tongue to conceive, nor his heart to report what my dream was. I will get Peter Quince to write a ballad of this dream ; it shall be called Bottom's Dream, because it hath no bottom." The impudence and reckless arrogance of Quack advertisements (to say nothing of their occasional Peter Quince poetry,) if the subject were not too serious, would be truly laughable. "Mothers (says one com-

pounder of a quack remedy) should never see the symptoms of worms in their children without immediately purchasing some of this infallible syrup." Now, to an instructed and experienced physician nothing is more equivocal than the symptoms of worms. There is no certain evidence of their presence but their expulsion; and often, too often, are children under suspicion of worms drugged with these boasted remedies to the serious injury of their constitutions, by lighting up or aggravating disease, which subsequently baffles the skill of the physician who may be called in, after rude ineffectual attempts to dislodge what perhaps had no existence. As wisely done as to fire a tree in order to get rid of an imaginary parasitic creeper.

Suppose one of the respectable physicians of your neighborhood should publish in the papers of the day a list of the cases which he had successfully treated (and in the practice of most, a whole county paper would not suffice for an annual report) or a long advertisement laudatory of himself or of some remedy for disease, to be manufactured, sold or prescribed only by himself or his agents, in the style of the quack rigmaroles which monopolize so large a portion of many of the otherwise useful public journals, would you not conclude that a great change had come over him? Would your good opinion of him be any way increased, or your confidence in him any way strengthened? Nay, would not something of sadness and even of contempt mingle with your first surprise at the announcement of the fact? And would you not consider him an egotistical braggart?

A certain patentee of cure-all pills writes thus: "We presume it is not generally known how much more pains are taken with the preparation of what are called patent medicines, than is bestowed on the prescriptions of physicians. With the latter it is positively shocking to witness the recklessness which is often manifested. A few words in Latin are hastily written on paper and put into the hands of an apothecary's apprentice. He may understand what is written or he may not, and yet with the poisons he compounds, a single mistake in the writing or compounding may be fatal to the patient." Now this is decidedly cool and rich. Of course (admitting for the mere sake of argument all that is said about mistakes in prescriptions and compounding) it goes on the assumption that the compounder of patent medicines never makes a mistake. Admit that the ingredients composing a quack medicine are all good and useful, and that they are thrown together by the bushel or barrel in the proper pharmaceutic proportions, is there

any security that they are always so well and intimately mixed by the rude laborers employed in the business as that each five grains or each table-spoonful shall contain exactly the same quantity of each ingredient? If not, and the results of a mistake are so serious in the case of a single prescription, what must follow the distribution of unskilfully compounded nostrums in the immense quantities in which Swaim, Brandreth, Wright, and their fellow cure-alls spread them over the land? We need not wonder that one of them asserts that a lady took six boxes (I presume he meant the contents of six boxes) in a very short space of time without any inconvenience. Swaim, it is well known, always asserted that his panacea did not contain a particle of mercury. This was demonstrated by Professor Hare to be a falsehood—a real quack deception. I knew a case in which a physician found it necessary to produce a slight mercurial impression on his patient and to keep it up some time (a thing by the bye much more seldom done than is supposed): the patient became impatient, and sent for a bottle of panacea to drive the mercury out; but the mouth grew sorer—he increased the dose of panacea—the mouth became worse. His physician was consulted on the subject, and on investigation, mercury was found in the remains of the bottle. If these nostrums are what they are represented to be why have so many of them fallen into oblivion? and why do they not continue to perform the same wonderful cures now that they were said to do during their short-lived popularity? We may well ask why. The answer is at hand. They have done all that they were intended to do—they have made fortunes for their proprietors. Half a century ago there lived in England a certain *Dr.* Solomon, the compounder of a certain pretended remedy for all “the thousand natural shocks that flesh is heir to,” called *Dr.* Solomon’s Balm of Gilead. You see the *ad captandam* name; artfully contrived to catch the ignorant. The Doctor lived in a splendid palace called Gilead House, adorned with paintings and statues, and surrounded with grounds in which nature and art seemed to aim at outvieing each other. He rode in an elegant carriage rivalling those of the nobility, adorned on the panels with his coat of arms richly emblazoned. Now the Doctor, in one of his rides, was met by a man who stepped up to the carriage and with an awkward doffing of the hat and scrape of the foot inquired in broad Lancashire dialect, “Is this Doctor Solomon?” “Yes.” “Well, sir, I bought a bottle of your stuff, and it did me no good at all.” “Did you take it all?” in-

quired the Doctor. "Yes, sir, I took every drop on't." The Doctor for a moment was nonplussed; but rallying himself he inquired, "Did you pay for it?" "Yes, sir, I paid a guinea for it." "Ah, well," said the Doctor, "then it did me good." Now where is the balm of Gilead?

Most of the quack remedies are advertised as derived solely from the vegetable kingdom. Very well—the majority of these are either purgative or aperient. Now perhaps it might be a sufficient reply to all this nonsense about vegetable compounds to say that of about twenty five purgative and aperient agents in use by the profession about twenty are vegetable; but we do not rest our cause here: if the Almighty Creator formed vegetable matter for the purpose of healing the bodily maladies of life (as is the canting assertion of some advocates of what are called botanical systems of medicine) we ask where is the proof? and failing to receive any, we again ask are animals and minerals of Satanic origin? If not, and they proceed from the same all-wise and beneficent Creator, where is the proof that they too may not be medicinal? Perhaps I need hardly remind this intelligent audience that the most deadly and sudden poisons known are of *vegetable* origin, and that all vegetables have a mineral base. A gentleman who rendered himself somewhat conspicuous a few years ago in the village in which I reside, by lecturing on a botanical system of medicine, inquired, as if he thought the argument unanswerable, "whether the Almighty did not know (if such was to be the fact) that men would sometimes have too much blood; and knowing this, whether he had not skill and wisdom enough to provide some sort of self acting safety valves that should without the aid of the lancet relieve the vessels of the superabundant blood?" But the tables were turned on him by the inquiry whether the Creator could not also have provided safety valves by which the stomach might be relieved without the use of Lobelia; and the emunctories of the skin be opened without the aid of a vapour bath?

Akin to the results which follow the unskilful employment of secret remedies or advertised medicines, are the ill consequences of the meddlesome interference of friends and neighbors with the orders and prescriptions of an attending physician. "Ignorance," it has been said, "spurns at proprieties, and brings forth the glow worm at noon day." There is a class of Lady Bountifuls and Matty Meddlesomes who are always on the alert to offer (no doubt with the kindest inten-

tions) improvements on the plan pursued by the physician ; to suggest doubts as to the nature of the disease, or to relate some wonderful cures performed either by themselves, or some one of the sisterhood, or by some favorite physician whose interest they are anxious to promote. I knew of a case of fever in which the physician was anxiously watching for the proper time to apply blisters, (what is called the blistering point) which occurs in some patients earlier than in others : but it was suggested by a friend that in another case, attended by another physician, blisters had been applied a day or two earlier with immediate benefit. This produced great anxiety on the part of the patient and his family ; and the physician had scarcely entered the room next day, when he was assailed with importunities to apply the blisters immediately, and hints were thrown out of the danger which he ran of losing the confidence of the family in case the patient did not recover. He *did recover* though the blisters were applied at the time that the attending physician deemed best ; and the patient thus learned a lesson which it is presumed from his own acknowledgment will be useful to him. A man suffering under intermittent fever was ordered to take an emetic and some other medicine and then to procure a mixture to be taken in the intervals of the paroxysms. On his next visit the physician inquired if the emetic had answered its purpose well, but was told it was not yet taken. A neighbor, who was an oracle in that region of country, stepped forward. The sick man was not willing to take the emetic unless she was present. She came bringing with her a phial, such as the medical attendant had ordered, containing a mixture of the Sulphate of Quina, on which were printed directions for its use, having these words appended : “An emetic or cathartic should *precede* the use of this mixture.” “Now, doctor,” said she triumphantly, “you are wrong, the emetic must not be given until this is all taken ; then I shall *proceed* with the emetic.” Now this is an extreme case, perhaps unparalleled. It is not likely ever to occur again, as the good, well-meaning lady has left for ever the scene of her medical labors. Her conduct may produce a smile in those who have enjoyed better opportunities than were hers of becoming acquainted with Johnson, and Webster, Murray and Kirkham : but let such persons remember that though their knowledge of their mother tongue effectually secures them against an error of this kind, still their want of knowledge of the principles of medical science is as great a barrier in the way of their correctly applying remedial agents in serious diseases

as was ignorance of the meaning and application of a plain English word in the case just recited.

The people in general, necessarily—unavoidably—have very crude notions of disease and its remedies. Do they know, in any particular case, whether it is the absorbents or exhalents that are out of time? Are they generally aware of the existence of such different sets of vessels? And yet in the diseases of those parts of the animal economy the remedies are completely at antipodes—are entirely opposed the one to the other. Look at the eye—it is a very small piece of machinery—amongst the people generally its diseases are all classed together as *sore eye*, and almost every body can cure a sore eye:—Rotten apple—eye water, made of they know not what—brandy and water—tincture of camphor, and even No. 6, each has its advocates, with numerous other articles—each being recommended as a *specific* to cure a sore eye. Now small as the eye is its component structures and its diseases are more various than those of any other organ of the human body. And of no organ of the body do the diseases require more nice discrimination or more cautious treatment—the list of them is much longer than any uninstructed person could imagine. There are several different kinds of inflammation, as follows: Strumons, Ophthalmia, purulent Ophthalmia, Cattarrhal Ophthalmia, Ophthalmia Tarsi, Pustular Ophthalmia and Rheumatic Ophthalmia: there are Iritis, Conjunctivitis, Amaurosis, Cataract, and Fistula Lachrymalis: and as an occasional result of some of those diseases, there is also opacity of the Cornea, or what is vulgarly called a skin growing over the eye—a popular opinion which has led to the absurd and destructive practice of blowing various articles, even *pulverized glass*, into the eye to *grind off the skin*. Many persons who would shrink from laying the tip of a finger on the surface of a healthy eye, will not scruple to apply to a diseased eye the most injurious agents.

The materials on which a physician works are not like those on which a mechanic works—a block of marble—a log of timber, or a bale of cotton, that is invariably the same thing; but the material part of man is continually passing through changes and undergoing new arrangements of the particles that compose it, either as the consequences of increasing years, variations of climate or changes of living—or as the results of disease latent or developed; hence we may not be the same to-day that we were yesterday. Understanding therefore the principles of organic chemistry, the physician endeavors to

adapt his remedies to the existing state of things at that time, day by day if necessary, anxiously watching their effects and changing or modifying them according to circumstances. It is therefore of primary importance that his directions should be rigidly and unremittingly complied with. Let it be remembered that a single departure from the directions laid down may derange or perhaps render nugatory all the previous treatment ; and, not only so, but perhaps embarrass or defeat all future efforts to bring the disease to a successful termination ; and the faithful and conscientious physician may have, in addition to the bitterness of disappointment, to bear the blame of want of skill. Ah ! what physician, of any length of time in practice, but who “on this hint” could tell many a sad tale. There are persons who will send for a physician and then follow just so much of his prescriptions as they in *their* judgment may deem advisable. They remind one of the lady who, on the day after she had made her swain happy, remarked to him that she thought they should never have any quarrels ; “for,” said she, “I am determined to comply with all your wishes ; but you must never cross me, dear, you must always let me have my own way.”

It has become very fashionable of late with some to expect a physician to explain every thing connected with a case of disease, either to the patient or his friends so that they may understand the matter as he does ; this cannot be, there are too many preliminaries to be learned as stepping stones to the ground which the physician occupies which not one in a thousand can be expected to know : and in medicine emphatically “a *little* learning is a dangerous thing.” A minister of the Gospel is bound to make the principles and practices of Christianity plain to his hearers ; this is his peculiar mission ; he is a *teacher* of religion : but a physician, like a lawyer, so far as the public is concerned, is a *practitioner*, not a *teacher*, and is not bound to communicate the knowledge acquired at great expense, much study and hard toil, any more than an artizan is bound to teach his art to those who employ him. So far as the welfare of his patient or his own reputation requires it a physician ought to explain and illustrate. To give one example : a man is sick—the inquiry is made what is the matter ? The physician, at first, is often unable positively to say, and perhaps his professional knowledge may be called in question : but let him explain that here are a set of symptoms, such as are the harbingers in common of several diseases ; but the distinctive symptoms, those

which will characterize the disease, and on which a diagnosis is to be founded have not yet revealed themselves ; let him state that present symptoms are to be met now, and future developments provided for as they arise ; and such an explanation should be sufficient.

I have told you something of what I think a physician should be and do. But do not expect too much even from the most enlightened and experienced. Remember that man is but a fallible being at best, with all his best applied knowledge and skill : and yet who that is wise would not rather trust to the unavoidable weakness, or if you please even the *mistakes* of knowledge than to the blunders and guesses of ignorance. The best pilot on our coast may be deceived in a fog : but who would therefore trust lives and vessel and cargo to one who had never studied the chart of the coast, and was therefore unacquainted with the dangers of the navigation, who was ignorant of the names and uses of the various parts of the rigging of the noble vessel intrusted to his care, who could not decide safely when to “swirl into the bay” under a crowd of sail, or cautiously to stand out to sea ; and even when he had decided to attempt either knew not whether to larboard or starboard the helm.

There is a saying sometimes applied to this subject which, like many sayings, may be compared to “a tale told by an idiot, full of sound—signifying nothing,” that a “jump judgment” is as good as any if correct. Aye—if correct ! but how can it be that a case of life and death can be safely poised on that tremendous “if” ? A lump of gold found in our daily walks is as valuable as a similar lump acquired by weeks of digging and delving ; but who builds his hopes of wealth on the chance of such a picking up ?

If such knowledge as is necessary to the safe practice of medicine can be as easily acquired as the advocates of empiricism seem to suppose: If nothing but *experience* be necessary (and without experience we are aware that previous knowledge is not made perfect) then has there been a great waste of the midnight oil—then have intense thought and anxious and minute investigation in pursuit of correct views in relation to health and disease, life and death, been all thrown away—then have all the talent and learning that have adorned the lives and rendered sacred the memories of the leading votaries of our profession been idly employed—then has many a valuable life been wantonly sacrificed on the altar of medical science by the perils and privations attendant on the preliminary studies and subsequent prosecution of medical practice.

A man is sick he needs a physician—he is helpless he requires a nurse ; and on the nurse devolves a responsibility inferior only to that of the physician—their responsibilities however differ ; that of the physician is the responsibility of *direction*—that of the nurse the responsibility of *obedience*. What would avail the most accurate discrimination of *disease*, the most faithful attendance, and the best arranged system of treatment, medical and dietetic, if the orders of the physician are not implicitly followed ? The value of an attentive, intelligent docile nurse is incalculable. In private life the duties of nursing generally devolve on the gentler sex whose soft hands and gentle manners, mild speech and domestic habits admirably qualify them for the office.

O woman ! in our hours of ease,
Uncertain coy and hard to please,
And variable as the shade,
By the light quiv'ring aspen made ;
When pain and sickness wring the brow,
A ministering angel thou !

I was writing of nurses, and immediately visions of woman in the hallowed characters of mothers, wives, sisters, daughters and neighbors rose before me. I saw the pining infant, in its meek and patient endurance of disease pressed to the soft maternal bosom, and soothed in a way that none but mother's know. I saw the fevered brow of the lately hale and stalwart man, now impotent as a child, wiped by the soft hand of a heart-stricken wife, and his hand grasped by an affectionate and dutiful daughter. I saw the aged father whose partner having climbed with him the hill of life, and hand in hand tottered with him to its base, was now too feeble to render him a helping hand, still officiously employed in faint endeavors to render little offices of love, while his daughters were watching for opportunities of relieving his distress, of mitigating his pains, and supporting his sinking frame. In short I saw woman exhibiting the *holiest glory of her character—Woman by the bed of affliction*.

In order to discharge the duties of a nurse with advantage to the patient, and so as to secure the full confidence of the medical attendant, it is proper that there should be a full appreciation of the responsibilities which are involved in the care of a sick person during the physician's absence. The mere routine of giving the "Doctor's stuff" at stated intervals, might in many cases be performed with punctuality and the diet be in strict conformity with the physician's orders, while

the efficacy of the remedies might be greatly neutralized by the absence of those ten thousand nameless delicate little attentions which are so soothing to a sufferer. There is scarcely an act about the room or person of an invalid but what may be well or ill performed. Often have well meant efforts to make a patient 'comfortable' as it is termed, by the manner of performing them been productive of a quite contrary effect. A necessary clean sheet rudely thrown on the bed has produced so great a change in the temperature of a patient as very seriously to operate against him. A well instructed nurse will consider herself as the *agent* of the *physician*, while she is the *friend* of the *invalid* and should avoid and prevent as far as possible all improper conversation (where conversation is permitted) in the chamber of sickness—all discouraging remarks—all allusions, direct and indirect, to similar cases of disease having a fatal termination, every thing tending to weaken the confidence of the patient in his medical attendant, or his own hopes of recovery. And when at last it has become the melancholy duty of the physician to announce that hope is extinct it is still her duty to continue and even to increase her previous assiduities in behalf of the sufferer; then comes the time indeed when under some circumstances (as in the absence of those whose special province it is to minister to the mind in things spiritual) that she who has passed days of toil and nights of watching to relieve a suffering, dying body, may rise of the sublime height of administering to the peace and comfort to an undying spirit. From the lips of her whose patience and assiduity have won the gratitude of the sufferer may come forth, with peculiar propriety and force words of high and holy trust, and of divine consolation.

There was an eminent physician in days gone by of the name of Meade. One of England's most eminent poets was his patient under circumstances of peculiar danger. The poet restored to health commemorates his recovery and his physician, and records his gratitude in one line, which (bating its rather hyperbolical strain) is creditable to him: "Alive by miracle!—alive by Meade!"

Amid the cares, anxieties, disappointments and frequent ingratitude which are peculiarly the lot of medical men; and which often render sad and dreary the journey of professional life there are many green and sunny spots. The almost unspeakable pleasure of seeing the rose revisit the lately pallid cheek, and vigor and activity again exhibited in the lately enfeebled and almost useless limbs; the smile of pleasant

recognition and the warm expressions of gratitude from a lately recovered patient, are to the heart of a physician a recompense for much toil and care, a valuable offset against occasional forgetfulness and neglect. It seems natural that a patient should feel grateful to a physician who has been instrumental in his recovery from serious illness; but this gratitude should find its expression, not only in words but in deeds, by prompt, and (where ability serves) even liberal remuneration. Medical men suffer more than is commonly known in this matter; for while the merchant's and mechanic's accounts are usually settled annually, the physician's too often remains for many years unattended to. It is also proper that due regard should be had to justice, in the matter even of thank-offering; to the skill and attention of our attending physician. It should be remembered that another physician, had he been in attendance, might, under the guidance of the same scientific principles, have produced equally beneficial results: and while we cherish a grateful remembrance of the services of the physician of our choice, let us entertain higher views of the *heaven-born art of healing* by which we were rescued from the grave.

As parties to a contract of life and death I have endeavored to show in a brief way some of the duties and responsibilities of physicians, patients and nurses. To those of a medical attendant there are many before me keenly alive. How heavily does a physician often feel them pressing upon him while examining a case of disease and observing the anxious searching gaze of the patient turned upon him as if endeavoring to penetrate his very thoughts—as though his decision were a sentence of life or death.

For nearly thirty years I have been acquainted with one side of this view of the case. Since I had the pleasure of listening to the last annual address in this place, I have been the subject of severe affliction, and of months of suffering scarcely to be exceeded. I *know* the heart of a *sufferer* from bodily affliction. I had the faithful and unremitted attendance of those who found it their pleasure to follow the stern dictates of duty. How grateful was the anxious solicitude expressed for me by physicians and neighbors and acquaintances. How touching and, I trust, instructive was the reply of one to an apology for the trouble I occasioned, "We are sent into the world to help one another." How soothing was a kind word or a glance of pity: the smallest favor had a priceless value in my estimation. How anxiously did I watch the time piece for the hour at which my kind and attentive medical friends usually arrived. Their "very step had music in it a coming up the stair." And when at last the decisive hour arrived in which I was to submit to the knife and saw of the surgeon, to part with limb to save life, I felt thankful to the Giver of all good, that such resource

could be found in the skill of the surgeon, and that life, as worthless as mine could be saved on any terms. And now, after nearly thirty years experience as a practitioner—five months experience as a sufferer—and seven months experience as a mutilated cripple, I am more than ever ready to commit myself and mine to the hands of the regularly educated and qualified practitioners of the art of healing.

We live in an age, certainly, of increasing light and knowledge : yet there lingers in human nature a love of the marvellous, a secret liking for things which are surrounded by a mysterious darkness, things which no man understands or pretends to understand ; hence the attractive charms which surround the pretended wonders of Uromancy, the simplicity of Hydropathy, the illogical, non-conclusive syllogisms of Homœopathy, the “baseless fabric” of Mesmerism, and the contrarieties of Thompsonism ; hence it is that a pill composed of we know not what, is more readily taken than one of which the components are *merely articles that every one knows* ; hence it is that people go to seek the recovery of lost health, under the influence of the same feeling, that sends them to an astrologer to inquire after a lost teaspoon.

It has been well said—

“ First man creates, and then he fears the elf ;
Thus others cheat him not, but he himself ;
He hates realities, and hugs the cheat,
And still the only pleasure’s the deceit.”